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<b>SERIAL NUMBER</b> 09/883,025	<b>FILING OR 371(c) DATE</b> 06/17/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> P31438 USA
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/215,770 06/30/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 08/09/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 30	<b>TOTAL CLAIMS</b> 53	<b>INDEPENDENT CLAIMS</b> 7
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

61214

**TITLE**

NEEDLE DEVICE AND METHOD THEREOF

<b>FILING FEE RECEIVED</b> 2114	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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